

DOCKET NO.: 206253US3PCT/trc



**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

IN RE APPLICATION OF: Nichimu INADA, et al.

SERIAL NUMBER: 09/830,560 GROUP: 3764

FILED: May 7, 2001 EXAMINER: THANH, Quang D.

FOR: MASSAGING APPARATUS HAVING PIVOTALLY SUPPORTED SUPPORTING ARM WITH THERAPEUTIC MEMBER

**TRANSMITTAL OF SUPPLEMENTAL APPLICATION DATA SHEET**

MAIL STOP ISSUE FEE  
COMMISSIONER FOR PATENTS  
P.O. BOX 1450  
ALEXANDRIA, VA 22313-1450

SIR:

Attached herewith is a Supplemental Application Data Sheet in order to correct the foreign priority information.

Respectfully Submitted,

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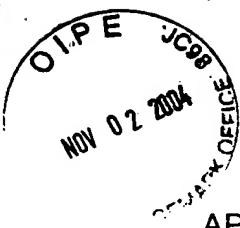
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**22850**

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(OSMMN 05/04)



## SUPPLEMENTAL APPLICATION DATA SHEET

### APPLICATION INFORMATION

Application Number:: 09/830,560  
Application Date:: 05/07/01  
Application Type:: REGULAR  
Subject Matter:: UTILITY  
CD-ROM or CD-R?:: NONE  
Title:: MASSAGING APPARATUS HAVING  
PIVOTALLY SUPPORTED  
SUPPORTING ARM WITH  
THERAPEUTIC MEMBER  
Attorney Docket Number:: 206253US3PCT  
Total Drawing Sheets:: 66  
Small Entity?:: NO

### INVENTOR INFORMATION

Applicant Authority Type:: INVENTOR  
Primary Citizenship Country:: Japan  
Status:: FULL CAPACITY  
Given Name:: Nichimu  
Family Name:: INADA  
City of Residence:: Osaka-shi  
State or Province of Residence:: Osaka  
Country of Residence:: Japan  
Street of Mailing Address:: c/o Family Kabushiki Kaisha, 17-26,  
Higashi-nakajima 1-chome, Higashi-  
yodogawa-ku  
City of Mailing Address:: Osaka-shi  
State or Province of Mailing Address:: Osaka  
Country of Mailing Address:: Japan

Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	Japan
Status::	FULL CAPACITY
Given Name::	Hideshi
Family Name::	KONDO
City of Residence::	Osaka-shi
State or Province of Residence::	Osaka
Country of Residence::	Japan
Street of Mailing Address::	c/o Family Kabushiki Kaisha, 17-26, Higashi-nakajima 1-chome, Higashi- yodogawa-ku
City of Mailing Address::	Osaka-shi
State or Province of Mailing Address::	Osaka
Country of Mailing Address::	Japan
Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	Japan
Status::	FULL CAPACITY
Given Name::	Yasuo
Family Name::	FUJII
City of Residence::	Osaka-shi
State or Province of Residence::	Osaka
Country of Residence::	Japan
Street of Mailing Address::	c/o Family Kabushiki Kaisha, 17-26, Higashi-nakajima 1-chome, Higashi- yodogawa-ku
City of Mailing Address::	Osaka-shi
State or Province of Mailing Address::	Osaka
Country of Mailing Address::	Japan

Applicant Authority Type:: INVENTOR  
Primary Citizenship Country:: Japan  
Status:: FULL CAPACITY  
Given Name:: Koji  
Family Name:: GOTO  
City of Residence:: Osaka-shi  
State or Province of Residence:: Osaka  
Country of Residence:: Japan  
Street of Mailing Address:: c/o Family Kabushiki Kaisha, 17-26,  
Higashi-nakajima 1-chome, Higashi-  
yodogawa-ku  
City of Mailing Address:: Osaka-shi  
State or Province of Mailing Address:: Osaka  
Country of Mailing Address:: Japan

#### CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 22850

#### REPRESENTATIVE INFORMATION

Representative Customer Number:: 22850

#### DOMESTIC PRIORITY INFORMATION

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/JP00/05808	08/28/00

#### FOREIGN PRIORITY INFORMATION

Application Number:	Country::	Filing Date::	Priority Claimed::
11-255930	Japan	09/09/99	YES
11-304069	Japan	10/26/99	YES
11-304070	Japan	10/26/99	YES
2000-8358	Japan	01/17/00	YES
2000-56185	Japan	03/01/00	YES
2000-163289	Japan	05/31/00	YES

#### ASSIGNMENT INFORMATION

Assignee Name:: Family Kabushiki Kaisha  
Street of Mailing Address:: 17-26, Higashi-nakajima 1-chome  
Higashi-yodogawa-ku  
City of Mailing Address:: Osaka-shi  
State or Province of Mailing Address:: Osaka  
Country of Mailing Address:: Japan